

U4 - GENERAL INFORMATION

First name: TIMOTHY **Middle Name:** SMITH **Last Name:** CALLAN **Suffix:**

Firm CRD#: 7691 **Firm Name:** MERRILL LYNCH, PIERCE, FENNER & SMITH INCORPORATED **Employment Date:** (MM/DD/YYYY): 01/03/2000 **CRD Branch#:**

Billing Code: 050-72B **Applicant CRD#:** 3092202 **Applicant SSN:** [REDACTED]

Employment Street Address 1: 4365 EXECUTIVE DR #650 **Employment Street Address 2:**

City: SAN DIEGO **State:** California **Country:** USA **Postal Code:** 92121

DUAL REGISTRATION

- A. Will applicant maintain registration with another Broker Dealer not under common ownership or control with the firm named above? ☐ Yes ☒ No
- B. Will applicant maintain registration with another Investment Adviser not under common ownership or control with the firm named above? ☐ Yes ☒ No

☒ Fingerprint card barcode 9923472951

By entering this bar code, I represent that I am submitting or promptly will submit to the CRD/PD Department the hard copy fingerprint cards via U.S. Mail or delivery service consistent with NASD Rule 1140.

☒ By selecting this option, I affirm that:

- Applicant has been continuously employed by the firm listed in the General Information section in an unregistered capacity since the last submission of a fingerprint card;
- Applicant is applying for registration with a Fingerprint Exempt firm;
- Applicant has submitted a fingerprint card through a CRD approved electronic method; or
- Applicant is a foreign national (not U.S. citizen or domiciled abroad).

U4 - AFFILIATED FIRMS

Will applicant maintain registration with firm(s) under common ownership or control with the filing firm?

If Yes, Please fill in the details to indicate a request for registration with additional firm(s).

☐ Yes ☒ No

U4 - SRO REGISTRATIONS

Check ☒ appropriate SRO Registration requests.

Qualifying examinations will be automatically scheduled if needed. If you are only scheduling or re-scheduling an exam, skip this item and complete the Examination Requests section.

REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PSE	CBOE	CHX	PHLX
OP - Registered Options Principal (S4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IR - Investment Company and Variable Contracts Products Rep. (S6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GS - Full Registration/General Securities Representative (S7)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
TR - Securities Trader (S7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TS - Trading Supervisor (S7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SU - General Securities Sales Supervisor (S9 and S10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

https://filing.cr.../crd_frm_Print.asp?Form=U4&RefNum=7218079383EBF16&Type=INITIAL&FL=2/15/00

EXHIBIT E -- REDACTED

ML001140

BM - Branch Office Manager (S9 and S10)		<input type="checkbox"/>	<input type="checkbox"/>							
SM - Securities Manager (S12)		<input type="checkbox"/>								
REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PSE	CBOE	CHX	PHLX	
AR - Assistant Representative/Order Processing (S11)	<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>		
IE - United Kingdom-Limited General Securities Registered Representative (S17)	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/>	
DR - Direct Participation Program Representative (S22)	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>			<input type="checkbox"/>		
GP - General Securities Principal (S24)	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		
IP - Investment Company and Variable Contracts Products Principal (S26)	<input type="checkbox"/>				<input type="checkbox"/>					
FA - Foreign Associate	<input type="checkbox"/>									
FN - Financial and Operations Principal (S27)	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		
REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PSE	CBOE	CHX	PHLX	
FI - Introducing Broker-Dealer/Financial and Operations Principal (S28)	<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>		
DP - Direct Participation Program Principal (S39)	<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>		
OR - Options Representative (S42)	<input type="checkbox"/>			<input type="checkbox"/>				<input type="checkbox"/>		
MR - Municipal Securities Representative (S52)	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>			<input type="checkbox"/>		
MP - Municipal Securities Principal (S53)	<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>		
CS - Corporate Securities Representative (S62)	<input type="checkbox"/>				<input type="checkbox"/>			<input type="checkbox"/>		
RG - Government Securities Representative (S72)	<input type="checkbox"/>									
REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PSE	CBOE	CHX	PHLX	
PG - Government Securities Principal (S73)	<input type="checkbox"/>									
SA - Supervisory Analyst (S16)		<input type="checkbox"/>								
CD - Canada-Limited General Securities Registered Representative (S37)	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			
CN - Canada-Limited General Securities Registered Representative (S38)	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>			
ET - Equity Trader (S55)	<input type="checkbox"/>				<input type="checkbox"/>					
AM - Allied Member		<input type="checkbox"/>								
AP - Approved Person		<input type="checkbox"/>								
LE - Securities Lending Representative		<input type="checkbox"/>								
REGISTRATION CATEGORY	NASD	NYSE	AMEX	BSE	CSE	PSE	CBOE	CHX	PHLX	
LS - Securities Lending Supervisor		<input type="checkbox"/>								
ME - Member Exchange		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>					
FE - Floor Employee		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>					
OF - Officer		<input type="checkbox"/>			<input type="checkbox"/>					
CO - Compliance Official (S14)		<input type="checkbox"/>								
CF - Compliance Official Specialist (S14A)		<input type="checkbox"/>								
PM - Floor Member Conducting Public Business		<input type="checkbox"/>								
PC - Floor Clerk Conducting Public Business		<input type="checkbox"/>								
U4 - JURISDICTION										
Check <input checked="" type="checkbox"/> appropriate jurisdiction for AG (Broker Dealer Agent) registration.										

https://filing.cr.../crd_frm_Print.asp?Form=U4&RefNum=7218079383EBF16&Type=INITIAL&FL= 2/15/00

EXHIBIT E -- REDACTED

ML001141

JURISDICTION	AG	IA	JURISDICTION	AG	IA	JURISDICTION	AG	IA	JURISDICTION	AG	IA
Alabama	<input type="checkbox"/>	<input type="checkbox"/>	Illinois	<input type="checkbox"/>	<input type="checkbox"/>	Montana	<input type="checkbox"/>	<input type="checkbox"/>	Puerto Rico	<input type="checkbox"/>	<input type="checkbox"/>
Alaska	<input type="checkbox"/>	<input type="checkbox"/>	Indiana	<input type="checkbox"/>	<input type="checkbox"/>	Nebraska	<input type="checkbox"/>	<input type="checkbox"/>	Rhode Island	<input type="checkbox"/>	<input type="checkbox"/>
Arizona	<input type="checkbox"/>	<input type="checkbox"/>	Iowa	<input type="checkbox"/>	<input type="checkbox"/>	New Jersey	<input type="checkbox"/>	<input type="checkbox"/>	South Carolina	<input type="checkbox"/>	<input type="checkbox"/>
Arkansas	<input type="checkbox"/>	<input type="checkbox"/>	Kansas	<input type="checkbox"/>	<input type="checkbox"/>	New Hampshire	<input type="checkbox"/>	<input type="checkbox"/>	South Dakota	<input type="checkbox"/>	<input type="checkbox"/>
California	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Kentucky	<input type="checkbox"/>	<input type="checkbox"/>	New Mexico	<input type="checkbox"/>	<input type="checkbox"/>	Tennessee	<input type="checkbox"/>	<input type="checkbox"/>
Colorado	<input type="checkbox"/>	<input type="checkbox"/>	Louisiana	<input type="checkbox"/>	<input type="checkbox"/>	New York	<input type="checkbox"/>	<input type="checkbox"/>	Texas	<input type="checkbox"/>	<input type="checkbox"/>
Connecticut	<input type="checkbox"/>	<input type="checkbox"/>	Maine	<input type="checkbox"/>	<input type="checkbox"/>	Nevada	<input type="checkbox"/>	<input type="checkbox"/>	Utah	<input type="checkbox"/>	<input type="checkbox"/>
Delaware	<input type="checkbox"/>	<input type="checkbox"/>	Maryland	<input type="checkbox"/>	<input type="checkbox"/>	North Carolina	<input type="checkbox"/>	<input type="checkbox"/>	Vermont	<input type="checkbox"/>	<input type="checkbox"/>
District of Columbia	<input type="checkbox"/>	<input type="checkbox"/>	Massachusetts	<input type="checkbox"/>	<input type="checkbox"/>	North Dakota	<input type="checkbox"/>	<input type="checkbox"/>	Virginia	<input type="checkbox"/>	<input type="checkbox"/>
Florida	<input type="checkbox"/>	<input type="checkbox"/>	Michigan	<input type="checkbox"/>	<input type="checkbox"/>	Ohio	<input type="checkbox"/>	<input type="checkbox"/>	Washington	<input type="checkbox"/>	<input type="checkbox"/>
Georgia	<input type="checkbox"/>	<input type="checkbox"/>	Minnesota	<input type="checkbox"/>	<input type="checkbox"/>	Oklahoma	<input type="checkbox"/>	<input type="checkbox"/>	West Virginia	<input type="checkbox"/>	<input type="checkbox"/>
Hawaii	<input type="checkbox"/>	<input type="checkbox"/>	Mississippi	<input type="checkbox"/>	<input type="checkbox"/>	Oregon	<input type="checkbox"/>	<input type="checkbox"/>	Wisconsin	<input type="checkbox"/>	<input type="checkbox"/>
Idaho	<input type="checkbox"/>	<input type="checkbox"/>	Missouri	<input type="checkbox"/>	<input type="checkbox"/>	Pennsylvania	<input type="checkbox"/>	<input type="checkbox"/>	Wyoming	<input type="checkbox"/>	<input type="checkbox"/>

U4 - EXAMINATION REQUESTS

13. Complete this item below only if you are scheduling or rescheduling an exam, or continuing education session.

<input type="checkbox"/> S3	<input type="checkbox"/> S10	<input type="checkbox"/> S16	<input type="checkbox"/> S28	<input type="checkbox"/> S38	<input type="checkbox"/> S62	<input type="checkbox"/> S101
<input type="checkbox"/> S4	<input type="checkbox"/> S11	<input type="checkbox"/> S17	<input type="checkbox"/> S30	<input type="checkbox"/> S39	<input type="checkbox"/> S63	<input type="checkbox"/> S106
<input type="checkbox"/> S5	<input type="checkbox"/> S12	<input type="checkbox"/> S22	<input type="checkbox"/> S31	<input type="checkbox"/> S42	<input type="checkbox"/> S65	<input type="checkbox"/> S201
<input type="checkbox"/> S6	<input type="checkbox"/> S14	<input type="checkbox"/> S24	<input type="checkbox"/> S32	<input type="checkbox"/> S52	<input checked="" type="checkbox"/> S66	
<input type="checkbox"/> S7	<input type="checkbox"/> S14A	<input type="checkbox"/> S26	<input type="checkbox"/> S33	<input type="checkbox"/> S53	<input type="checkbox"/> S72	
<input type="checkbox"/> S9	<input type="checkbox"/> S15	<input type="checkbox"/> S27	<input type="checkbox"/> S37	<input type="checkbox"/> S55	<input type="checkbox"/> S73	

13A. If you have taken an exam prior to registering through the CRD system please enter the exam type and date taken.

Exam type:

Date taken (MM/DD/YYYY):

Date Month (MM) Day (DD) Year (YYYY)

Signature of Appropriate Signatory {italicize Appropriate Signatory}

Type or Print Name of Appropriate Signatory {italicize Appropriate Signatory}

U4 - PERSONAL INFORMATION		
Firm CRD # 7691	Social Security # [REDACTED]	Applicant's CRD# 3092202
First Name TIMOTHY	Middle Name SMITH	Last Name CALLAN
Suffix	Date of Birth (MM/DD/YYYY) [REDACTED]/1977	Sex <input checked="" type="radio"/> Male <input type="radio"/> Female
State/Province of Birth CALIFORNIA	Country of Birth USA	Weight (lbs) 165
Height (ft) 5	Height (in) 10	
Hair Color BROWN	Eye Color HAZEL	

https://filing.cr.../crd_frm_Print.asp?Form=U4&RefNum=7218079383EBF16&Type=INITIAL&FL=2/15/00

EXHIBIT E -- REDACTED

ML001142

U4 - OTHER NAMES

No Information Filed

U4 - RESIDENTIAL HISTORY

From	To	Street (Do not use a P.O.Box)	City	State	Country	Zip

U4 - EMPLOYMENT HISTORY

From	To	Name of Company or Firm	Investment-related business?	City	State	Country	Position
01/2000	02/2000	MERRILL LYNCH	<input checked="" type="radio"/> Yes <input type="radio"/> No	SAN DIEGO	CA	USA	ORIENTATION FINANCIAL CONSULTANT
08/1999	12/1999	CHARLES SCHWAB	<input checked="" type="radio"/> Yes <input type="radio"/> No	SAN FRANCISCO	CA	USA	WINGS ASSOCIATE
06/1999	07/1999	TRAVELING TO EUROPE	<input type="radio"/> Yes <input checked="" type="radio"/> No				
08/1995	05/1999	UNIVERSITY OF COLORADO	<input type="radio"/> Yes <input checked="" type="radio"/> No	BOULDER	CO	USA	FULL-TIME STUDENT
06/1998	07/1998	CHARLES SCHWAB	<input checked="" type="radio"/> Yes <input type="radio"/> No	SAN FRANCISCO	CA	USA	INTERN
06/1997	07/1997	NORDSTROM	<input type="radio"/> Yes <input checked="" type="radio"/> No	SANTA ANA	CA	USA	SALES ASSOCIATE
06/1996	07/1996	NORDSTROM	<input type="radio"/> Yes <input checked="" type="radio"/> No	SANTA ANA	CA	USA	SALES ASSOCIATE
08/1991	07/1995	CANYON HIGH SCHOOL	<input type="radio"/> Yes <input checked="" type="radio"/> No	ANAHEIM	CA	USA	HIGH SCHOOL STUDENT
08/1988	07/1991	EL RANCHO MIDDLE SCHOOL	<input type="radio"/> Yes <input checked="" type="radio"/> No	ANAHEIM	CA	USA	MIDDLE SCHOOL STUDENT

U4 - OTHER BUSINESS

Are you currently engaged in any other business either as a proprietor, partner, officer, director, employee, trustee, agent or otherwise? (please exclude non *investment-related* activity which is exclusively charitable, civic, religious or fraternal and is recognized as tax exempt.) If YES, please provide the following details: the name of the other business, whether the business is *investment-related*, the address of the other business, the nature of the other business, your position, title, or relationship with the other business, the start and end dates of your relationship, the approximate number of hours/month devoted to the other business, the number of hours devoted to the other business during securities trading hours, and briefly describe your duties relating to the other business.

☐ Yes ☒ No

https://filing.cr.../crd_frm_Print.asp?Form=U4&RefNum=7218079383EBF16&Type=INITIAL&FL=2/15/00

EXHIBIT E -- REDACTED

ML001143

Date Month (MM) Day (DD) Year (YYYY)

Signature of Appropriate Signatory {italicize Appropriate Signatory}

Type or Print Name of Appropriate Signatory {italicize Appropriate Signatory}

U4 - DISCLOSURE QUESTIONS

IF THE ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS 'YES' AND YOU CANNOT UTILIZE THE CERTIFICATION IN ITEM N BELOW, COMPLETE DETAILS OF ALL EVENTS OR PROCEEDINGS ON APPROPRIATE DRP(S)

REFER TO THE EXPLANATION OF TERMS SECTION OF FORM U-4 INSTRUCTIONS FOR EXPLANATIONS OF ITALICIZED TERMS.

Criminal Disclosure

- | | YES | NO |
|---|-----------------------|-----------------------|
| 23A. (1) Have you ever: | | |
| (a) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i> ? | <input type="radio"/> | <input type="radio"/> |
| (b) been <i>charged</i> with any <i>felony</i> ? | <input type="radio"/> | <input type="radio"/> |
| (2) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever: | | |
| (a) been convicted of or pled guilty or nolo contendere ('no contest') in a domestic or foreign court to any <i>felony</i> ? | <input type="radio"/> | <input type="radio"/> |
| (b) been <i>charged</i> with any <i>felony</i> ? | <input type="radio"/> | <input type="radio"/> |
| 23B. (1) Have you ever: | | |
| (a) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor involving</i> : investments or an <i>investment-related</i> business or any fraud, false statements or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion or a conspiracy to commit any of these offenses? | <input type="radio"/> | <input type="radio"/> |
| (b) been <i>charged</i> with a <i>misdemeanor</i> specified in 23B(1)(a)? | <input type="radio"/> | <input type="radio"/> |
| (2) Based upon activities that occurred while you exercised <i>control</i> over it, has an organization ever: | | |
| (a) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic or foreign court to a <i>misdemeanor</i> specified in 23B(1)(a)? | <input type="radio"/> | <input type="radio"/> |
| (b) been <i>charged</i> with a <i>misdemeanor</i> specified in 23B(1)(a)? | <input type="radio"/> | <input type="radio"/> |

Regulatory Disciplinary Actions

- | | YES | NO |
|--|-----------------------|-----------------------|
| 23C. Has the U.S. Securities and Exchange Commission or the Commodity Futures Trading Commission ever: | | |
| (1) <i>found</i> you to have made a false statement or omission? | <input type="radio"/> | <input type="radio"/> |
| (2) <i>found</i> you to have been <i>involved</i> in a violation of its regulations or statutes? | <input type="radio"/> | <input type="radio"/> |
| (3) <i>found</i> you to have been a cause of an <i>investment-related</i> business having its authorization to do business denied, suspended, revoked or restricted? | <input type="radio"/> | <input type="radio"/> |
| (4) entered an <i>order</i> against you in connection with <i>investment-related</i> activity? | <input type="radio"/> | <input type="radio"/> |
| (5) imposed a civil money penalty on you, or <i>ordered</i> you to cease and desist from any activity? | <input type="radio"/> | <input type="radio"/> |

23D. Has any other Federal regulatory agency or any state regulatory agency or *foreign financial regulatory authority* ever:

https://filing.cr.../crd_frm_Print.asp?Form=U4&RefNum=7218079383EBF16&Type=INITIAL&FL= 2/15/00

- (1) *found* you to have made a false statement or omission or been dishonest, unfair or unethical? ☐ ☐
- (2) *found* you to have been *involved* in a violation of *investment-related* regulation(s) or statute(s)? ☐ ☐
- (3) *found* you to have been a cause of an *investment-related* business having its authorization to do business denied, suspended, revoked or restricted? ☐ ☐
- (4) entered an *order* against you in connection with an *investment-related* activity? ☐ ☐
- (5) denied, suspended, or revoked your registration or license or otherwise, by *order*, prevented you from associating with an *investment-related* business or restricted your activities? ☐ ☐

23E. Has any *self-regulatory organization* or commodities exchange ever:

- (1) *found* you to have made a false statement or omission? ☐ ☐
- (2) *found* you to have been *involved* in a violation of its rules (other than a violation designated as a "*minor rule violation*" under a plan approved by the U.S. Securities and Exchange Commission)? ☐ ☐
- (3) *found* you to have been a cause of an *investment-related* business having its authorization to do business denied, suspended, revoked or restricted? ☐ ☐
- (4) disciplined you by expelling or suspending you from membership, barring or suspending your association with its members, or restricting your activities? ☐ ☐

23F. Has your authorization to act as an attorney, accountant or federal contractor ever been revoked or suspended? ☐ ☐

23G. Have you been notified, in writing, that you are now the subject of any:

- (1) regulatory complaint or *proceeding* that could result in a "yes" answer to any part of 23C, D or E? (If yes, complete the Regulatory Action Disclosure Reporting Page.) ☐ ☐
- (2) *investigation* that could result in a "yes" answer to any part of 23A, B, C, D or E? (If yes, complete the Investigation Disclosure Reporting Page.) ☐ ☐

Civil Judicial Actions

- 23H. (1) Has any domestic or foreign court ever: **YES NO**
- (a) *enjoined* you in connection with any *investment-related* activity? ☐ ☐
- (b) *found* that you were *involved* in a violation of any *investment-related* statute(s) or regulation(s)? ☐ ☐
- (c) dismissed, pursuant to a settlement agreement, an *investment-related* civil action brought against you by a state or *foreign financial regulatory authority*? ☐ ☐
- (2) Are you named in any pending *investment-related* civil action that could result in a 'yes' answer to any part of 23H(1)? ☐ ☐

Customer Complaints

- 23I. (1) Have you ever been named as a respondent/defendant in an *investment-related* consumer-initiated arbitration or civil litigation which alleged that you were *involved* in one or more *sales practice violations* and which: **YES NO**
- (a) is still pending, or; ☐ ☐
- (b) resulted in an arbitration award or civil judgment against you, regardless of amount, or; ☐ ☐
- (c) was settled for an amount of \$10,000 or more? ☐ ☐
- (2) Have you ever been the subject of an *investment-related*, consumer-initiated complaint, not otherwise reported under question 23I(1) above, which alleged that you were *involved* in one or more *sales practice violations*, and which complaint was settled for an amount of \$10,000 or more? ☐ ☐
- (3) Within the past twenty four (24) months, have you been the subject of an *investment-related*, consumer-initiated written complaint, not otherwise reported under question 23I(1) or 23I(2) above, which:
- (a) alleged that you were *involved* in one or more *sales practice violations* and ☐ ☐

contained a claim for compensatory damages of \$5,000 or more (if no damage amount is alleged, the complaint must be reported unless the firm has made a good faith determination that the damages from the alleged conduct would be less than \$5,000), or;

- (b) alleged that you were *involved* in forgery, theft, misappropriation or conversion of funds or securities? ☐ YES ☒ NO

Terminations

- 23J. Have you ever voluntarily *resigned*, been discharged or permitted to *resign* after allegations were made that accused you of: **YES NO**
- (1) violating *investment-related* statutes, regulations, rules, or industry standards of conduct? ☐ YES ☒ NO
- (2) fraud or the wrongful taking of property? ☐ YES ☒ NO
- (3) failure to supervise in connection with *investment-related* statutes, regulations, rules or industry standards of conduct? ☐ YES ☒ NO

Financial

- 23K. Within the past 10 years: **YES NO**
- (1) have you made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition? ☐ YES ☒ NO
- (2) based upon events that occurred while you exercised *control* over it, has an organization made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition? ☐ YES ☒ NO
- (3) based upon events that occurred while you exercised *control* over it, has a broker or dealer been the subject of an involuntary bankruptcy petition, or had a trustee appointed, or had a direct payment procedure initiated under the Securities Investor Protection Act? ☐ YES ☒ NO

- 23L. Has a bonding company ever denied, paid out on, or revoked a bond for you? ☐ YES ☒ NO

- 23M. Do you have any unsatisfied judgments or liens against you? ☐ YES ☒ NO

DISCLOSURE CERTIFICATION (OPTIONAL)

You may only certify to the accuracy and completeness of the disclosure information in your file if it has been fully provided in DRP format. If DRP(s) are not on file, do not answer these certification boxes. Provide full details of all matters on DRP(s). All appropriate questions in Item 23 above must be answered, regardless of whether the certification is being utilized. Refer to the Form U-4 instructions for additional information on the utilization of the certification language.

- N. I have received a copy of my disclosure file taken from the CRD system. I acknowledge that all information contained therein is fully disclosed, accurate and in DRP format. I further certify the following:
1. I have no new further information to add to my disclosure file. 1. ☐
2. I have new information to add to my disclosure file which is reported on the appropriate DRP(s). 2. ☐
3. I have updated information, reported on the appropriate DRP(s), which was previously reported. 3. ☐

(MM DD YYYY)

Signature of Applicant

Type or Print Name of Applicant

https://filing.cr.../crd_firm_Print.asp?Form=U4&RefNum=7218079383EBF16&Type=INITIAL&FL= 2/15/00

Signature of Appropriate Signatory {italicize Appropriate Signatory}

Type or Print Name of Appropriate Signatory {italicize Appropriate Signatory}

U4 - SIGNATURE

1. I swear or affirm that I have read and understand the items and instructions on this form and that my answers (including attachments) are true and complete to the best of my knowledge. I understand that I am subject to administrative, civil or criminal penalties if I give false or misleading answers.
2. I apply for registration with the *jurisdictions* and *SROs* indicated in Item 11 as may be amended from time to time and in consideration of the *jurisdictions* and *SROs* receiving and considering my application, I submit to the authority of the *jurisdictions* and *SROs* and agree to comply with all provisions, conditions and covenants of the statutes, constitutions, certificates of incorporation, by-laws and rules and regulations of the *jurisdictions* and *SROs* as they are or may be adopted, or amended from time to time. I further agree to be subject to and comply with all requirements, rulings, orders, directives and decisions of, and penalties, prohibitions and limitations imposed by the *jurisdictions* and *SROs*, subject to right of appeal or review as provided by law.
3. I agree that neither the *jurisdictions* or *SROs* nor any person acting on their behalf shall be liable to me for action taken or omitted to be taken in official capacity or in the scope of employment, except as otherwise provided in the statutes, constitutions, certificates of incorporation, by-laws or the rules and regulations of the *jurisdictions* and *SROs*.
4. I authorize the *jurisdictions* and *SROs* to give any information they may have concerning me to any employer or prospective employer, any federal, state or municipal agency, or any other *SRO* and I release the *jurisdictions* and *SROs* and any person acting on their behalf from any and all liability of whatever nature by reason of furnishing such information.
5. I agree to arbitrate any dispute, claim or controversy that may arise between me and my firm, or a customer, or any other person, that is required to be arbitrated under the rules, constitutions, or by-laws of the *SROs* indicated in item 11 as may be amended from time to time and that any arbitration award rendered against me may be entered as a judgment in any court of competent *jurisdiction*.
6. For the purpose of complying with the laws relating to the offer of sale of securities or commodities, I irrevocably appoint the administrator of each *jurisdiction* indicated in item 11 as may be amended from time to time, or such other person designated by law, and the successors in such office, my attorney upon whom may be served any notice, process, pleading, subpoena or other document in any action or *proceeding* against me arising out of or in connection with the offer or sale of securities or commodities, or out of the violation or alleged violation of the laws of such *jurisdictions*. I consent that any such action or proceeding against me may be commenced in any court of competent *jurisdiction* and proper venue by service of process upon the appointee as if I were a resident of, and had been lawfully served with process in the *jurisdiction*. I request that a copy of any notice, process, pleading, subpoena or other document served hereunder be mailed to my current residential address as reflected in this form or any amendment thereto.
7. I consent that the service of any process, pleading, subpoena, or other document in any

investigation or administrative *proceeding* conducted by the SEC, CFTC or a *jurisdiction* or in any civil action in which the SEC, CFTC or a *jurisdiction* are plaintiffs, or the notice of any investigation or *proceeding* by any SRO against the applicant, may be made by personal service or by regular, registered or certified mail or confirmed telegram to me at my most recent business or home address as reflected in this Form U-4, or any amendment thereto, by leaving such documents or notice at such address, or by any other legally permissible means.

8. I authorize all my employers and any other person to furnish to any *jurisdiction*, SRO, employer, prospective employer, or any agent acting on its behalf, any information they have, including my creditworthiness, character, ability, business activities, educational background, general reputation, history of my employment and, in the case of former employers, complete reasons for my termination. Moreover, I release each employer, former employer and each other person from any and all liability, of whatever nature, by reason of furnishing any of the above information, including that information reported on the Uniform Termination Notice for Securities Industry Registration (Form U-5). I recognize that I may be the subject of an investigative consumer report and waive any requirement of notification with respect to any investigative consumer report ordered by any *jurisdiction*, SRO, employer, or prospective employer. I understand that I have the right to request complete and accurate disclosure by the *jurisdiction*, SRO, employer or prospective employer of the nature and scope of the requested investigative consumer report.
9. I understand and certify that the representations in this form apply to all employers with whom I seek registration as indicated in items 4 and 10 of this form. I agree to update this form by causing an amendment to be filed on a timely basis whenever changes occur to answers previously reported. Further, I represent that, to the extent any information previously submitted is not amended, the information provided in this form is currently accurate and complete.
10. I authorize any employer or prospective employer to file electronically on my behalf any information required in this form or any amendment thereto; I certify that I have reviewed and approved the information to be submitted to any *jurisdiction* or SRO on this form U-4 Application. I agree that I will review and approve all disclosure information that will be filed electronically on my behalf; I further agree to waive any objection to the admissibility of the electronically filed records in any criminal, civil, or administrative *proceeding*.

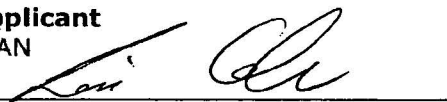
Applicant or applicant's agent has typed applicant's name under this section to attest to the completeness and accuracy of this record. The applicant recognizes that this typed name constitutes, in every way, use or aspect, his or her legally binding signature.

(All applicants must execute this page.)

Date (MM/DD/YYYY)
02/15/2000

Name of Applicant
TIM S. CALLAN

Signature



THE FIRM MUST COMPLETE THE FOLLOWING:

To the best of my knowledge and belief, the applicant is currently bonded where required, and, at the time of approval, will be familiar with the statutes, constitution(s), rules and by-laws of the agency, *jurisdiction* or SRO with which this application is being filed, and the rules governing registered persons, and will be fully qualified for the position for which application is being made herein. I agree that, notwithstanding the approval of such agency, *jurisdiction* or SRO which hereby is requested, I will not employ the applicant in the capacity stated herein without first receiving the approval of any authority that may be required by law.

This firm has communicated with all of the applicant's previous employers for the past three years and has documentation on file with the names of the persons contacted and the date of contact. In addition, I have taken appropriate steps to verify the accuracy and completeness of the information

https://filing.cr.../crd_firm_Print.asp?Form=U4&RefNum=7218079383EBF16&Type=INITIAL&FL=2/15/00

contained in and with this application.

I have provided the applicant an opportunity to review the information contained herein and the applicant has approved this information and signed the Form U-4.


*The appropriate signatory area **must** be completed on all initial, amendment or Temporary Registration filings.*

The appropriate signatory area for Page 1 or Page 2 amendments consists of the date, signature and name lines below.

The applicant and appropriate signatory areas for Page 3 amendments consist of the date, signature and name lines for the appropriate signatory below and the date, signature and name lines for the applicant above.

The applicant and appropriate signatory areas for initial or Temporary Registration filings consist of the date, signature and name lines for the appropriate signatory below, together with the attestations that precede such lines, and the date, signature and name lines for the applicant above, together with the ten (10) numbered attestations that precede such lines for the applicant. For a Temporary Registration, applicant must also execute the Temporary Registration Acknowledgement.

Date (MM/DD/YYYY)
02/15/2000

Name of Appropriate Signatory
KATHLEEN J. DURNING
Signature 

U4 - CRIMINAL DRP

No Information Filed

U4 - REGULATORY ACTION DRP

No Information Filed

U4 - CIVIL JUDICIAL DRP

No Information Filed

U4 - CUSTOMER COMPLAINT DRP

No Information Filed

U4 - TERMINATION DRP

No Information Filed

U4 - INVESTIGATION DRP

No Information Filed

U4 - BANKRUPTCY DRP

No Information Filed

U4 - BOND DRP

No Information Filed

U4 - JUDGMENT LIEN DRP

No Information Filed

ATTACHMENT A

(Please read, sign and return to the Registration Department with your Form U-4)

3080. Disclosure to Associated Persons When Signing Form U-4

A member shall provide an associated person with the following written statement whenever the associated person is asked to sign a new or amended Form U-4.

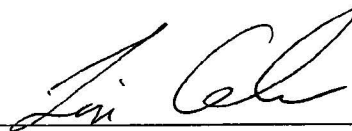
The Form U-4 contains a predispute arbitration clause. It is in item 5 on page 4 of the Form U-4. You should read that clause now. Before signing the Form U-4, you should understand the following:

- (1) You are agreeing to arbitrate any dispute, claim or controversy that may arise between you and your firm, or a customer, or any other person, that is required to be arbitrated under the rules of the self-regulatory organizations with which you are registering. This means you are giving up the right to sue a member, customer, or another associated person in court, including the right to a trial by jury, except as provided by the rules of the arbitration forum in which a claim is filed.
- (2) A claim alleging employment discrimination, including a sexual harassment claim, in violation of a statute is not required to be arbitrated under the NASD rules. Such a claim may be arbitrated at the NASD only if the parties have agreed to arbitrate it, either before or after the dispute arose. The rules of other arbitration forums may be different.
- (3) Arbitration awards are generally final and binding; a party's ability to have a court reverse or modify an arbitration award is very limited.
- (4) The ability of the parties to obtain documents, witness statements and other discovery is generally more limited in arbitration than in court proceedings.
- (5) The arbitrators do not have to explain the reason(s) for their award.
- (6) The panel of arbitrators may include arbitrators who were or are affiliated with the securities industry, or public arbitrators, as provided by the rules of the arbitration forum in which a claim is filed.
- (7) The rules of some arbitration forums may impose time limits for bringing a claim in arbitration. In some cases, a claim that is ineligible for arbitration may be brought in court.

Date:

2/17/00

Signed:



FORM U-4
UNIFORM APPLICATION FOR SECURITIES INDUSTRY REGISTRATION OR TRANSFER

ATTACHMENT SHEET FOR ITEMS 19, 20 AND 21

LAST NAME <i>Callan</i>	JR/SR, etc	FIRST NAME <i>Tim</i>	MIDDLE NAME <i>Smith</i>
CRD #	SOCIAL SECURITY # [REDACTED]		FIRM CRD #

Use this Attachment Sheet to report continued information from Items 19, 20 and 21 of Form U-4.
 (For Item 23 use the Disclosure Reporting Page (DRP).)

ITEM OF FORM (IDENTITY)	ANSWER
19	06 1997 - 07 1997 513 Tumbleweed Rd Anaheim CA. 92807
19	01 1997 - 05 1997 911 17 th St. Boulder CO. 80302
19	08 1996 - 12 1996 1555 Broadway #230 Boulder CO. 80302
19	06 1996 - 07 1996 513 Tumbleweed Rd Anaheim CA. 92807
19	08 1995 - 05 1996 University of Colorado Boulder, CO. 80302 Kittrege Smith #107
19	01 1990 - 07 1995 513 Tumbleweed Rd. Anaheim CA. 92807

MONTH	DAY	YEAR	SIGNATURE OF APPROPRIATE SIGNATORY
-------	-----	------	------------------------------------